

TRANSMITTAL SLIP		DATE <i>15 Nov</i>	
TO: <i>D/S</i>			
ROOM NO.	BUILDING		
REMARKS: <i>Sent to [unclear] for SITE + [unclear]</i> <i>(1) for STD</i>			
FROM: <i>S/7/22</i>			
ROOM NO. <i>2122</i>	BUILDING <i>11</i>	EXTENSION <i>8622</i>	

FORM NO. 241
1 FEB 55

REPLACES FORM 36-8
WHICH MAY BE USED.

(47)